

AO 440 (Rev. 10/93) Summons in a Civil Action

UNITED STATES DISTRICT COURT

District of

MASSACHUSETTS

RICHARD W. DUGGAN

SUMMONS IN A CIVIL CASE

V.

JOHN POTTER, POSTMASTER  
GENERAL, ET AL

CASE

04-11116-DPW

TO: (Name and address of Defendant)

John Potter, PMG/CEO  
US POSTAL SVC  
475 LEFFANT PLAZA  
WASHINGTON DC 20260-0010

YOU ARE HEREBY SUMMONED and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

PROSE  
Richard W Duggan  
103 OAK LANE #6  
BROCKTON MA 02301

an answer to the complaint which is herewith served upon you, within 60 days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.

TONY ANASTAS

7/14/2004

CLERK

DATE

*Mitchell Rymer*  
(By) DEPUTY CLERK

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RETURN OF SERVICE	
Service of the Summons and complaint was made by me <sup>(1)</sup>	DATE <u>7/19/04</u>
NAME OF SERVER (PRINT) <u>Richard W Duggan</u>	TITLE <u>MGR DIST OPS BMS 24</u>
Check one box below to indicate appropriate method of service	
<input type="checkbox"/> G Served personally upon the third-party defendant. Place where served: _____	
<input type="checkbox"/> G Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein. Name of person with whom the summons and complaint were left: _____	
<input type="checkbox"/> G Returned unexecuted: _____	
<input type="checkbox"/> G Other (specify): <u>Mailed via Certified MAIL # 7004 0750 0001 8599 7884</u>	

STATEMENT OF SERVICE FEES		
TRAVEL	SERVICES	TOTAL

DECLARATION OF SERVER	
I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.	
Executed on <u>7/19/04</u> <small>Date</small>	<u>Richard W Duggan</u> <small>Signature of Server</small> <u>103 OAKLAND #6</u> <u>BROOKTON MA 02301</u> <small>Address of Server</small>

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**WASHINGTON DC 20260**

Postage	\$ 0.37
Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 4.42</b>

Sent To John Potter PMG/CEO  
 Street, Apt. No., or PO Box No. 475 LEFANT  
 City, State, ZIP+4 WASHINGTON DC 20260

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

US Postal Service  
 John Potter Postmaster Genl  
 475 Lefant Plaza  
 Washington DC20260-0010

07/1

2. Article Number (Transfer from service label)

See R 3811, February 2004

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature <u>[Signature]</u> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee	C. Date of Delivery <u>7/21/04</u>
B. Received by (Printed Name) <u>OPMG</u>	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

7004 0750 0001 8599 7884

Domestic Return Receipt

102595-02-M-154

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